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<b>State:</b>	District of Columbia	<b>Filing Company:</b>	CorePointe Insurance Company
<b>TOI/Sub-TOI:</b>	05.0 CMP Liability and Non-Liability/05.0003 Commercial Package		
<b>Product Name:</b>	CorePoint Package Filing		
<b>Project Name/Number:</b>	CorePoint Package Filing/DC-PK-1601-02-1116		

## Filing at a Glance

Company:	CorePointe Insurance Company
Product Name:	CorePoint Package Filing
State:	District of Columbia
TOI:	05.0 CMP Liability and Non-Liability
Sub-TOI:	05.0003 Commercial Package
Filing Type:	Rule
Date Submitted:	09/02/2015
SERFF Tr Num:	UNKP-130229274
SERFF Status:	Closed-APPROVED
State Tr Num:	
State Status:	
Co Tr Num:	DC-PK-1601-02-1116
Effective Date	01/01/2016
Requested (New):	
Effective Date	01/01/2016
Requested (Renewal):	
Author(s):	Denise Freund, Charleen Marshall, Sheila Levine
Reviewer(s):	Monica Myers (primary)
Disposition Date:	09/04/2015
Disposition Status:	APPROVED
Effective Date (New):	
Effective Date (Renewal):	

**State:** District of Columbia **Filing Company:** CorePointe Insurance Company  
**TOI/Sub-TOI:** 05.0 CMP Liability and Non-Liability/05.0003 Commercial Package  
**Product Name:** CorePoint Package Filing  
**Project Name/Number:** CorePoint Package Filing/DC-PK-1601-02-1116

## General Information

Project Name: CorePoint Package Filing Status of Filing in Domicile: Authorized  
 Project Number: DC-PK-1601-02-1116 Domicile Status Comments:  
 Reference Organization: Insurance Services Office, Inc. Reference Number: ML-2015-RLA1; RP-2012-RML09; ML-2004-ORU04; RP-2001-RIR01  
 Reference Title: Advisory Org. Circular: LI-ML-2015-025; LI-ML-2012-007; LI-ML-2004-075; LI-ML-2001-073  
 Filing Status Changed: 09/04/2015  
 State Status Changed: Deemer Date:  
 Created By: Sheila Levine Submitted By: Sheila Levine  
 Corresponding Filing Tracking Number:

### Filing Description:

Commercial Package Policy– ISO and Company Rules

For the purpose of background: Chrysler Insurance Company was a residual asset remaining from the Chrysler bankruptcy of 2009 and the subsequent sale of its financial unit in 2012. At the time of the financial unit sale, Chrysler Insurance changed its name to CorePointe Insurance Company (CorePointe) and continued to operate in the bankruptcy trust of Chrysler Corporation. On March 2, 2015 AmTrust Financial (AmTrust) finalized the purchase of this asset and CorePointe became part of the AmTrust group of companies. AmTrust shall now make all future filings on behalf of CorePointe Insurance Company.

The purpose of this filing is to align CorePointe's rule designations with those of one of our lead carriers, Wesco Insurance Company, and to establish record keeping clarity. For this reason we are submitting for your review and approval our initial Commercial Package Policy filing for the above company. The rules that will be used are those filed on our behalf by ISO as part of our ISO affiliation.

We will be using the most current ISO rule references up to and including:

ISO/Bureau Reference	ISO/Bureau Effective Date	Approval Circular
ML-2015-RLA1	11/1/2015	LI-ML-2015-025
RP-2012-RML09	10/1/2012	LI-ML-2012-007
ML-2004-ORU04	3/1/2005	LI-ML-2004-075
RP-2001-RIR01	5/1/2002	LI-ML-2001-073

We are also submitting our Company/Independent Commercial Package rules. Rule PK-7-CW Package Modification Factors – Eligibility, modifies ISO Rule 7 – Eligibility, subpart A.2 to include Garage Liability and Auto Dealers Coverage.

This filing has been approved in our Domicile state of Michigan. To the best of our knowledge this filing is in compliance with State and Insurance Department laws and regulations. Your earliest review and approval is appreciated.

## Company and Contact

### Filing Contact Information

Sheila Levine, sheila.levine@amtrustgroup.com

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59 Maiden Lane  
42nd Floor  
New York, NY 10038

646-458-7964 [Phone]

**Filing Company Information**

CorePointe Insurance Company  
401 S. Old Woodward Ave  
Suite 300  
Birmingham, MI 48009  
(216) 525-5097 ext. [Phone]

CoCode: 10499  
Group Code: 2538  
Group Name: AmTrust Group  
FEIN Number: 38-1775863

State of Domicile: Michigan  
Company Type: Insurance  
Company  
State ID Number:

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**Filing Fees**

Fee Required?	No
Retaliatory?	No
Fee Explanation:	

State:	District of Columbia	Filing Company:	CorePointe Insurance Company
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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
APPROVED	Monica Myers	09/04/2015	09/04/2015

## Objection Letters and Response Letters

### Objection Letters

Status	Created By	Created On	Date Submitted
Pending Industry Response	Monica Myers	09/04/2015	09/04/2015

### Response Letters

Responded By	Created On	Date Submitted
Charleen Marshall	09/04/2015	09/04/2015

<b>State:</b>	District of Columbia	<b>Filing Company:</b>	CorePointe Insurance Company
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## Disposition

Disposition Date: 09/04/2015

Effective Date (New):

Effective Date (Renewal):

Status: APPROVED

Comment:

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
CorePointe Insurance Company	0.000%	0.000%	\$0	0	\$0	0.000%	0.000%

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Consulting Authorization		Yes
Supporting Document	Actuarial Certification (P&C)		Yes
Supporting Document	District of Columbia and Countrywide Experience for the Last 5 Years (P&C)		Yes
Supporting Document	District of Columbia and Countrywide Loss Ratio Analysis (P&C)		Yes
Rate	Company Rule Exceptions		Yes

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**State:** District of Columbia **Filing Company:** CorePointe Insurance Company  
**TOI/Sub-TOI:** 05.0 CMP Liability and Non-Liability/05.0003 Commercial Package  
**Product Name:** CorePoint Package Filing  
**Project Name/Number:** CorePoint Package Filing/DC-PK-1601-02-1116

## Objection Letter

Objection Letter Status	Pending Industry Response
Objection Letter Date	09/04/2015
Submitted Date	09/04/2015
Respond By Date	09/18/2015

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Dear Sheila Levine,

**Introduction:**

Please complete the Rate/Rule Schedule of the Rate/Rule Schedule tab.

How does your proposed change impact the existing rule?

How would existing DC policyholders be positively impacted by your proposed change?

How would existing DC policyholders be adversely impacted by your proposed change?

**Conclusion:**

Sincerely,  
Monica Myers

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## Response Letter

Response Letter Status	Submitted to State
Response Letter Date	09/04/2015
Submitted Date	09/04/2015

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Dear Monica Myers,

**Introduction:**

Please see below

**Response 1**

**Comments:**

- 1) Rate / Rule Schedule Tab completed and sent as Post Submission Update
- 2) Proposed change impact to existing rule - we are expanding the availability of the Package Modification Factors to apply to Garage and Auto Dealers.
- 3) DC Policyholders positively impacted - policyholders would be positively impacted as additional coverages qualifying for the PMFs have been added - garage and auto dealers.
- 4) DC Policyholders adversely impact - there is no negative impact to this change.

**Changed Items:**

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

**Conclusion:**

Sincerely,  
Charleen Marshall

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## Post Submission Update Request Processed On 09/04/2015

Status: Allowed  
Created By: Charleen Marshall  
Processed By: Monica Myers  
Comments:

### Rate Information:

Field Name	Requested Change	Prior Value
Rate Data Applies	Yes	No
Filing Method	File and Use	
Rate Change Type	Neutral	
Overall Pct. of Last Revision	0.000%	
Filing Method of Last Filing	N/A - Initial	

### Company Rate Information:

Company Name:CorePointe Insurance Company

Field Name	Requested Change	Prior Value
Overall % Indicated Change	0.000%	
Overall % Rate Impact	0.000%	
Written Premium Change for this Program	\$0	
Number of Policy Holders Affected for this Program	0	
Written Premium for this Program	\$0	
Maximum %Change (where required)	0.000%	
Minimum %Change (where required)	0.000%	



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## Rate Information

Rate data applies to filing.

Filing Method:	File and Use
Rate Change Type:	Neutral
Overall Percentage of Last Rate Revision:	0.000%
Effective Date of Last Rate Revision:	
Filing Method of Last Filing:	N/A - Initial

### Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
CorePointe Insurance Company	0.000%	0.000%	\$0	0	\$0	0.000%	0.000%

<b>State:</b>	District of Columbia	<b>Filing Company:</b>	CorePointe Insurance Company
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## Rate/Rule Schedule

Item No.	Schedule Item Status	Exhibit Name	Rule # or Page #	Rate Action	Previous State Filing Number	Attachments
1		Company Rule Exceptions	PK-7-CW 0815	New		PK-7-CW 0815 - Package Modification Factors - Eligibility.pdf

COMMERCIAL LINES MANUAL  
DIVISION NINE – COMMERCIAL PACKAGE POLICY

COMPANY RULE EXCEPTIONS

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PK-7-CW 0815 PACKAGE MODIFICATION FACTORS - ELIGIBILITY

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**Rule 7 A. Eligibility**, Subpart 2. is deleted and replaced by the following:

2. Any other Coverage Part which at least provides bodily injury and property damage liability coverage for the premises/operations hazard at all premises covered for direct physical damage as specified in Paragraph A.1. of this rule. Garage liability and Auto Dealers Coverage will be deemed to meet this definition.

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## Supporting Document Schedules

<b>Bypassed - Item:</b>	Consulting Authorization
<b>Bypass Reason:</b>	N/A
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	Actuarial Certification (P&C)
<b>Bypass Reason:</b>	N/A
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	District of Columbia and Countrywide Experience for the Last 5 Years (P&C)
<b>Bypass Reason:</b>	N/A
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	District of Columbia and Countrywide Loss Ratio Analysis (P&C)
<b>Bypass Reason:</b>	N/A
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	